

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Hiroyasu KURASHINA

Serial No: 10/775,821

Confirmation No: 8188

Filed: February 10, 2004

For: Printing Apparatus and Method of Displaying
Explanations of Printing Apparatus (Amended)

Art Unit: 2625

Examiner: Zheng, Jacky X

I hereby certify that this correspondence is
being transmitted via electronic filing to:Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

September 11, 2008

Date of Deposit

Juanita Soberanis

Name

Signature *Juanita Soberanis* 9/11/2008

Signature

Date

Mail Stop RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following:

- ☒ Request for Continued Examination (RCE) Transmittal.
☒ Amendment.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	8	-	20	**	0	
					LG=\$50 SM=\$25	\$80
INDEPENDENT CLAIMS FEE	3	-	3	***	0	\$ 0
					LG=\$210 SM=\$105	\$210
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$370 SMALL ENTITY FEE = \$185	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$260 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claims: 1, 6 and 8						TOTAL
						\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the amount of \$ 0 to cover the additional claims fee to Deposit Account No. 50-1314.
☐ Please charge the amount of \$ 0 to cover the extension fee to Deposit Account No. 50-1314.
☒ Please charge the amount of \$ 810 to cover the RCE fee to Deposit Account No. 50-1314.
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.By: *Troy M. Schmelzer*Troy M. Schmelzer
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Date: September 11, 2008

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